



PATENT  
P55657

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

JAE-ICK HO

RECEIVED

JUL 19 2004

Serial No: 09/280,541

Examiner: NGUYEN, KEVIN M.

Technology Center 2600

Filed: 30 March 1999

Art Unit: 2674

For: APPARATUS FOR INPUTTING AND DETECTING A DISPLAY DATA  
CHANNEL IN MANUFACTURING A MONITOR

**TRANSMITTAL OF APPELLANT'S BRIEF FEE**

**Mail Stop: Appeal Brief-Patents**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Accompanying this transmittal is a check drawn to the Commissioner of Patents and Trademarks in the amount of \$330.00 for the filing a Brief in support of a Notice of Appeal filed on 10 May 2004. Should any additional fees be incurred, the Commissioner is authorized to charge Deposit Account No. 02-4943 in that amount. Please inform the Applicant of any transactions involving the Deposit Account.

Respectfully submitted,

Robert E. Bushnell

Attorney for Applicant

Reg. No.: 27,774

1522 "K" Street, N.W., Suite 300  
Washington, D.C. 20005  
Area Code: 202-408-9040

Folio: P55657  
Date: 12 July 2004  
I.D.: REB/sb



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL		Complete If Known	
Patent fees are subject to annual revision.		Application Number	09/280,541
		Filing Date	30 March 1999
		First Named Inventor	JAE-ICK HO
		Examiner Name	NGUYEN, KEVIN M.
		Group/Art Unit	2674
TOTAL AMOUNT OF PAYMENT	(\$) <u>330.00</u>	Attorney Docket No.	P55657
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge ANY DEFICIENCY to:		3. ADDITIONAL FEES	
Deposit Account Number: <u>02-4943</u>		Technology Center 2600	
Deposit Account Number: _____			
<input type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. §1.16 and 1.17.			
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
2. <input checked="" type="checkbox"/> Payment Enclosed: (CHECK #45806)			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	770	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80
SUBTOTAL (1) (\$) <u>.00</u>			
2. EXTRA CLAIM FEES			
Total claims -20** = x =			
Independent Claims -8** = x =			
Multiple Dependent =			
** or number previously paid, if greater; For Reissues, see below			
Large Entity Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1201	86	2201	43
1202	18	2202	9
1203	290	2203	145
1204	86	2204	43
1205	18	2205	9
SUBTOTAL (2) (\$) <u>.00</u>			
		3. ADDITIONAL FEES	
		Large Entity Small Entity	
		Fee Code	Fee (\$)
		1051	130
		2051	65
		1052	50
		2052	25
		1053	130
		1053	130
		1812	2,520
		1812	2,520
		1804	920*
		1804	920*
		1805	1,840*
		1805	1,840*
		1251	110
		2251	55
		1252	420
		2252	210
		1253	950
		2253	475
		1254	1,480
		2254	740
		1255	2,010
		2255	1,005
		1401	330
		2401	165
		1402	330
		2402	165
		1403	290
		2403	145
		1451	1,510
		1451	1,510
		1452	110
		2452	55
		1453	1,330
		2453	665
		1501	1,330
		2501	665
		1502	480
		2502	240
		1503	640
		2503	320
		1460	130
		1460	130
		1807	50
		1807	50
		1806	180
		1806	180
		8021	40
		8021	40
		1809	770
		2809	385
		1810	770
		2810	385
		1801	770
		2801	385
		Other Fee (specify) _____	
		Other Fee (specify) _____	
		** Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) \$ 330.00	
SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name		Reg. Number	
Robert E. Bushnell, Esq.		27,774	
Signature		Date	
		12 July 2004	
		Deposit Account	
		User ID	

REB/sb

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.